

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

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CLAIM

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51	1					
2							52		2				
3							53		2				
4							54		2				
5							55	1					
6							6		1				
7							7						
8							8						
9							9						
10							10						
11							11						
12							12						
13							13						
14							14						
15							15						
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17							17						
18							18						
19							19						
20	1						20						
21		1					21						
22							22						
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43							43						
44							44						
45							45						
46							46						
47							47						
48							48						
49							49						
50	1						50						
TOTAL IND.	3						TOTAL IND.						
TOTAL DEP.	7						TOTAL DEP.						
TOTAL CLAIMS	10						TOTAL CLAIMS						